

INSTRUCTIONS

APPLICATION FOR SERVICE CREDIT

1. The filing of this form does not obligate the applicant to purchase any past service credit for which payment may be required. Under present laws and regulations, active military service creditable for retirement purposes without cost. *The applicant is required to submit an official document reflecting inclusive dates of all active military service.*
2. Complete the form to the best of your recollection. Do not communicate with the Department or Agencies involved for verification of dates of employment.
3. Complete the form in duplicate and submit the original to:
 - a. U.S. Department of State
Office of Retirement
2401 E Street, NW Room H620
Washington, DC 20522-0108
 - b. Your Human Resource Office if you are employed by another agency.
4. As soon as it is possible to verify the service claimed, the applicant will be informed of any payments required to obtain credit. **DO NOT SEND ANY REMITTANCE WITH THIS APPLICATION**

PRIVACY ACT STATEMENT

PURPOSES AND USES

The primary purposes of the information solicited are to support enrollment, document an election not to enroll, and/or support a present or future claim for benefits under the Foreign Service Retirement Systems, the Federal Employees' Health Benefits Program, and/or the Federal Employees' Group Life Insurance Program. The information may be shared with a) other Federal agencies, b) national, State, county, municipal, or other publicly charitable or social security administration agencies, and c) private insurance carriers providing elected benefits. It will be shared only to the extent necessary to adjudicate a benefit or determine enrollment under the programs administered by such agencies.

EFFECTS OF NONDISCLOSURE

Provision of the information requested is voluntary; however, failure to supply all of the information may delay or prevent action on your or your survivor's enrollment or claim for benefits.

INFORMATION REGARDING DISCLOSURE OF YOUR SOCIAL SECURITY NUMBER UNDER PUBLIC LAW 93-579, SECTION 7(B), IF APPLICABLE

Disclosure by you of your Social Security Number is mandatory to obtain the services, benefits, or processes that you are seeking. Solicitation of the Social Security Number by the U.S. Department of State is authorized under provisions of Executive Order 9397, dated November 22, 1943. The Social Security Number is used as an identifier throughout your Federal career from the time of application through retirement. It will be used primarily to identify your records that you file with the Department of State and other Federal agencies in connection with lawful requests for information about you from your former employers, educational institutions, and financial or other organizations. The information gathered through the use of the number will be used only as necessary in personnel administration processes carried out in accordance with established regulations and published notices of systems of records. The Social Security Number also will be used for the selection of persons to be included in statistical studies of personnel management matters. The use of the Social Security Number is made necessary because of the large number of present and former Federal employees and applicants who have identical names and birth dates and whose identities can only be distinguished by the Social Security Number.



U.S. Department of State
Bureau of Human Resources/Office of Retirement

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1a. Name <i>(Last, First, MI.)</i>		2. List all other names you have used		
1b. Address <i>(Number and Street)</i>		3. Date of Birth <i>(mm-dd-yyyy)</i>	4. Social Security Number	
1c. City, State, and ZIP Code		5. Currently Employed By <i>(check one)</i> <input type="checkbox"/> State <input type="checkbox"/> Other Agency		
6. List below in chronological order all federal civilian service from July 1, 1924 during which no Foreign Service retirement deductions were withheld from your salary.				
Department or Agency	Location of Employment <i>(City and State)</i>	Title of Position	Periods of Service	
			Beginning Date <i>(mm-dd-yyyy)</i>	Ending Date <i>(mm-dd-yyyy)</i>
7. Military Record List below inclusive dates of active military service - <i>(See form instructions)</i>				
Organization	Rank	Entrance Into Active Duty <i>(mm-dd-yyyy)</i>	Date of Honorable Discharge <i>(mm-dd-yyyy)</i>	
Date <i>(mm-dd-yyyy)</i>	Signature of Applicant			